

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION | INITIALS | IS NO. | DATE |
|---------------------------|------------|---------------|-----------------|
| FEE DETERMINATION | | | |
| O.I.P.E. CLASSIFIER | <i>SW</i> | <i>32</i> | <i>11/15</i> |
| FORMALITY REVIEW | <i>BZ</i> | <i>323</i> | <i>01-16-02</i> |
| RESPONSE FORMALITY REVIEW | <i>A M</i> | <i>JC 580</i> | <i>02-21-02</i> |

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral) ... Canceled A Appeal
 + Restricted O Objected

| Claim | Date |
|----------------|---------------|
| Final Original | |
| 1 | <i>4/2/04</i> |
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| 5 | <i>Y</i> |
| 6 | <i>V</i> |
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| Claim | Date |
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| Claim | Date |
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
 staple additional sheet here

(LEFT INSIDE)

126 02
1/16 02
326
02-22-02